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| Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary) | | Complete if Known | |
| | | Application Number | |
| | | Filing Date | |
| | | First Named Inventor | SMIRTHWAITE, Amie, et al. |
| | | Group Art Unit | |
| | | Examiner Name | |
| Sheet | 1 | of | 1 |
| | | Attorney Docket Number | 78104084/N16680 |

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| Examiner Signature | /Ann Schillinger/ | Date Considered | 05/24/2007 |
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